State of Wisconsin Department of Safety & Professional Services

AGENDA REQUEST FORM

1) Name and Title of Per	nitting the Request	: 2) Date Wh	2) Date When Request Submitted:			
Nifty Lynn Dio, Bureau A		08/15/2016	08/15/2016			
On behalf of Tom Ryan,		Items will be	Items will be considered late if submitted after 12:00 p.m. on the deadline			
2) Name of Board Committee Council Continue			date which i	date which is 8 business days before the meeting		
3) Name of Board, Committee, Council, Sections:						
Medical Examining Board						
4) Meeting Date:	- I '			i) How should the item be titled on the agenda page?		
08/17/2016			Americal Osteopathic Association (AOA) Code of			
	Ethics			(, , , , , , , , , , , , , , , , , , ,		
7) Place Item in:		8) Is an appearance before the Board being			9) Name of Case Advisor(s), if required:	
Open Session		scheduled?		N/A		
☐ Closed Session			Board Appearance Re			
				oquoot)		
10) Describe the issue and action that should be addressed:						
http://www.osteopathic.org/inside-aoa/about/leadership/Pages/aoa-code-of-ethics.aspx						
http://www.osteopatine.org/mside-aoa/abodu/leadersinp/r ages/aoa-code-or-etines.aspx						
11) Authorization						
Addionzation						
Nifty Lynn Dio			08/15/2016			
Signature of person mal	request			Date		
Supervisor (if required)				Date		
Executive Director signature (indicates approval to add post agenda deadline item to agenda) Date						
Directions for including supporting documents:						
 This form should be attached to any documents submitted to the agenda. Post Agenda Deadline items must be authorized by a Supervisor and the Policy Development Executive Director. 						
3. If necessary, provide original documents needing Board Chairperson signature to the Bureau Assistant prior to the start of a						
meeting						